

STATE OF MAINE
COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

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PARTY COMMITTEE REPORT - 2004

COMMITTEE IDENTIFICATION (Include full name of committee.)

Name _____

Street address _____

(official headquarters of committee)

City, zip code _____ Telephone _____

Check if address
is different than
previously reported

☐

TREASURER IDENTIFICATION

Name of treasurer _____

Street address _____

City, zip code _____ Telephone _____

Check if address
is different than
previously reported

☐

STATE COMMITTEE FILING PERIODS (Check applicable period below):

Due Date	Reporting Period
_____ January 15, 2004	October 1, 2003 – January 5, 2004
_____ April 12, 2004	January 6, 2004 – March 31, 2004
_____ June 2, 2004	April 1, 2004 – May 27, 2004
_____ July 20, 2004	May 28, 2004 – July 13, 2004
_____ October 12, 2004	July 14, 2004 – September 30, 2004
_____ October 27, 2004	October 1, 2004 – October 21, 2004
_____ December 14, 2004	October 22, 2004 – December 7, 2004
_____ January 18, 2005	December 8, 2004 – January 5, 2005

Is this an amendment? Yes / No (please circle one)

MUNICIPAL/COUNTY/DISTRICT COMMITTEE FILING PERIODS (Check applicable period below):

_____ January 15, 2004	July 1, 2003 – December 31, 2003
_____ July 15, 2004	January 1, 2004 – June 30, 2004
_____ October 27, 2004	July 1, 2004 – October 22, 2004

**I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE IT IS TRUE,
CORRECT AND COMPLETE.**

Treasurer's Signature

Date

REPORTING EXEMPTION: Any party committee receiving and expending less than \$1,500 in one calendar year is exempt from the reporting requirements for that year.

DETAILED SUMMARY PAGE OF CONTRIBUTIONS AND EXPENDITURES**RECEIPTS****Totals**

1. Cash contributions (other than loans) this reporting period (from Schedule A)

2. In-kind contributions received this period (from Schedule A-1)

3. Receipts other than cash contributions reported on Schedule A

4. Total receipts this period (add lines 1-3)

5. Pledges received but not yet paid (from Schedule D)
(Do not add to total contributions.)**EXPENDITURES**

6. In-kind expenditures this reporting period (from Schedule A-1)

7. Contributions to candidates, committees (from Schedule B)

8. Other expenditures made on behalf of candidates/committees (from Schedule B-1)

9. Operating expenditures (from Schedule B-2)

10. Total expenditures this period (add lines 5, 6, 7, 8)

LOANS

11. Loans received this reporting period (from Schedule C)

12. Loan repayments this reporting period (from Schedule C-1)

TOTAL OUTSTANDING BILLS

13. From Schedule D-1, line 3

CASH CONTRIBUTIONS RECEIVED

Itemize cash contributions from any individual contributor that in the aggregate total more than \$200. Include name, mailing address, occupation, and place of business of each such contributor. Do not include loans or in-kind contributions on this schedule.

Date received	Contributor's name, mailing address, zip code	Occupation, place of business	Amount

1. Total contributions this page only

Last page only Schedule A:

2. Total from attached pages (Schedule A)

3. Aggregate contributions of \$200 or less not itemized

4. Total contributions this reporting period
(Enter on page 2, line 1.)

IN-KIND CONTRIBUTIONS/EXPENDITURES

Part 1. In-kind contributions and their expenditures. These include donated materials, goods, services, or supplies in a form other than cash or negotiable instruments. Record all such contributions along with the fair market value of the items. The fair market value is what it would have cost if you had paid cash for the donated items or services. With respect to all items and services received and expended, enter the date received, a description of the item or service, and the fair market value. Enter contributor information if the fair market value of donated item or service is more than \$200.

Date received	Contributor's name, mailing address, zip code Occupation and place of business	Description of goods, services, discounts or facilities received/expended	Fair market value
1. In-kind contributions/expenditures (from Part 1 this page)			
<i>Last page only Schedule A-1:</i>			
2. Total from attached pages (Schedule A-1)			
3. Total in-kind contributions received and expended this reporting period (Enter on page 2, lines 2 and 5.)			

Part 2. If any of the items shown in Part 1 was, in turn, contributed to a candidate, political committee, political action committee, or another party committee, list the candidate/committee to whom the item was contributed and describe the item given.

(Amounts in this section are not carried forward to the summary page.)

Date of contribution	Candidate/committee's name, mailing address, zip code	Office sought District #	Description of goods, services or facilities received	Fair market value

EXPENDITURES MADE**CASH EXPENDITURES ON BEHALF OF CANDIDATES, COMMITTEES**

Report all expenditures in cash of the committee made on behalf of (i.e., cash contributions to) a candidate, political committee, political action committee or other party committee. List name and address of candidate, office sought, district candidate seeks to represent; list identity and address of a campaign or committee; list date of expenditure. Include all such expenditures, whatever the amount.

Do not include loan repayments or in-kind expenditures on this schedule.

Date received	Candidate/committee's name	Candidate/committee's mailing address, zip code	Office sought District #	Amount

1. Expenditures this page only

Last page only Schedule B:

2. Total from attached pages (Schedule B)

3. Total contributions to candidates/committees
(Enter on page 2, line 6.)

Other expenditures such as goods, services, materials, supplies, etc., purchased by the committee and provided to a candidate, political committee, political action committee, or party committee. List name and address of candidate, office sought, district candidate seeks to represent; list identity and address of a campaign or committee; list date of expenditure. Include all such expenditures, whatever the amount.

CGEEP Form PCR/B-1 (Rev. 12/03)

Include operational expenses and other cash expenditures not made on behalf of a candidate, committee, or campaign. List the name and address of each payee; list the reason for the expenditure and the date and amount of each.

Date of payment	Recipient's name, mailing address, zip code	Purpose of expenditure	Amount
1. Expenditures this page			
<i>Last page only Schedule B-2:</i>			
2. Total from attached pages (Schedule B-2)			
3. Total operating expenditures this reporting period (Enter on page 2, line 8.)			

Schedule C

LOANS

1. Noncommercial loans

Loans from one individual aggregating more than \$200 must be itemized.

Report noncommercial loans of more than \$200 used to support the nomination or election of a candidate.

Loans from financial institutions are not subject to reporting laws.

Date of loan	Contributor's name, mailing address, zip code	Occupation, principal place of business	Amount
1. Loans aggregating more than \$200			
2. Aggregate loans of \$200 or less not itemized			
3. Total loans received this reporting period (Add lines 1 and 2. Enter on page 2, line 10.)			

Schedule C-1

LOAN REPAYMENTS

Repayment of loans. List only repayments of loans reported on Schedule C.

Date of repayment	Name and address of lender	Amount repaid this reporting period
Total amount repaid this reporting period (Enter on page 2, line 11.)		

Schedule D**PLEDGES**

Pledges from one person aggregating more than \$200 must be itemized. Include name, mailing address, occupation, and place of business of each contributor.

Date of pledge	Name, mailing address, zip code of person making pledge	Occupation, principal place of business	Amount
1. Total pledges			
2. Aggregate pledges of \$200 or less not itemized			
3. Total pledges this reporting period (Add lines 1 & 2.) (Enter on page 2, line 4.)			

Schedule D-1**TOTAL OUTSTANDING BILLS (OTHER THAN LOANS)**

Itemize only obligations incurred in support of candidates/committees that are unpaid by the closing date. Do not include actual expenditures. Debts must be disclosed in each report filed until payment is made to the vendor.

Date obligation incurred	Creditor's name, address, zip code	Purpose	Amount
1. Total outstanding bills (Enter on page 2, line 12.)			